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CHRISTIAN COMMUNITY HOME 1320 WISCONSIN STREET

Number of Residents on 12/31/05:

HUDSON 54016 Phone:(715) 386-9303
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/05): 81
Total Licensed Bed Capacity (12/31/05): 81

Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified?
Title 19 (Medicaid) Certified?
Average Daily Census:

Non-Profit Corporation Skilled No Yes Yes

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Age, Gender, and Primary Diagnosis o	of Residents (12/	31/05)		Length of Stay (12/31/05)	8			
Primary Diagnosis %		Age Groups 	*	Less Than 1 Year 1 - 4 Years				
Developmental Disabilities	0.0	Under 65	3.8	More Than 4 Years	19.0			
Mental Illness (Org./Psy)	30.4	65 - 74	5.1	İ				
Mental Illness (Other)	2.5	75 - 84	26.6		100.0			
Alcohol & Other Drug Abuse	0.0	85 - 94	48.1					
Para-, Quadra-, Hemiplegic	0.0	95 & Over	16.5	Full-Time Equivalent				
Cancer	3.8			Nursing Staff per 100 Resid	lents			
Fractures	7.6	İ	100.0	(12/31/05)				
Cardiovascular	25.3	65 & Over	96.2					
Cerebrovascular	6.3			RNs	12.3			
Diabetes	3.8	Gender	8	LPNs	7.5			
Respiratory	1.3			Nursing Assistants,				
Other Medical Conditions	19.0	Male	26.6	Aides, & Orderlies	41.9			
		Female	73.4	İ				
	100.0	İ		İ				
		İ	100.0	İ				

Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	<u>:</u>		amily Care			anaged Care	l		
Level of Care	No.	90	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	10	100.0	376	7	20.0	157	0	0.0	0	3	8.8	160	0	0.0	0	0	0.0	0	20	25.3
Skilled Care	0	0.0	0	28	80.0	134	0	0.0	0	31	91.2	145	0	0.0	0	0	0.0	0	59	74.7
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	10	100.0		35	100.0		0	0.0		34	100.0		0	0.0		0	0.0		79	100.0

Admissions, Discharges, and		Percent Distributior	n of Residents'	Condit	ions, Services, an	d Activities as of 12,	/31/05
Deaths During Reporting Period		 		Total			
Percent Admissions from:		Activities of	%		% Needing ssistance of	% Totally	Number of
Private Home/No Home Health	5.8	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		59.5	40.5	79
Other Nursing Homes	14.5	Dressing	10.1		55.7	34.2	79
Acute Care Hospitals	71.0	Transferring	29.1		29.1	41.8	79
Psych. HospMR/DD Facilities	0.0	Toilet Use	21.5		36.7	41.8	79
Rehabilitation Hospitals	1.4	Eating	54.4		25.3	20.3	79
Other Locations	0.0	*******	******	*****	*******	******	******
Total Number of Admissions	69	Continence		%	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	5.1	Receiving Resp	iratory Care	17.7
Private Home/No Home Health	9.1	Occ/Freq. Incontiner	nt of Bladder	50.6	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	19.7	Occ/Freq. Incontiner	nt of Bowel	31.6	Receiving Suct	ioning	0.0
Other Nursing Homes	1.5				Receiving Osto	my Care	1.3
Acute Care Hospitals	4.5	Mobility			Receiving Tube	Feeding	7.6
Psych. HospMR/DD Facilities	3.0	Physically Restraine	ed	5.1	Receiving Mech	anically Altered Diets	21.5
Rehabilitation Hospitals	3.0						
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	51.5	With Pressure Sores		5.1	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		3.8	Medications		
(Including Deaths)	66	İ			Receiving Psyc	hoactive Drugs	64.6

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

***************	*****	****	*****	*****	*****	*****	*****	*****	*****
		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Non	orofit	50	-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.3	93.4	1.03	86.3	1.12	88.8	1.08	88.1	1.09
	75.9			80.0	0.95	83.2	0.91	77.6	0.98
Current Residents from In-County		85.9	0.88						
Admissions from In-County, Still Residing	31.9	20.9	1.53	18.8	1.70	18.7	1.70	18.1	1.76
Admissions/Average Daily Census	88.5	162.7	0.54	180.5	0.49	177.7	0.50	162.3	0.55
Discharges/Average Daily Census	84.6	162.0	0.52	178.7	0.47	179.2	0.47	165.1	0.51
Discharges To Private Residence/Average Daily Census	24.4	81.3	0.30	87.1	0.28	83.4	0.29	74.8	0.33
Residents Receiving Skilled Care	100	97.5	1.03	96.4	1.04	96.3	1.04	92.1	1.09
Residents Aged 65 and Older	96.2	96.3	1.00	93.5	1.03	91.3	1.05	88.4	1.09
Title 19 (Medicaid) Funded Residents	44.3	54.2	0.82	59.0	0.75	61.8	0.72	65.3	0.68
Private Pay Funded Residents	43.0	31.8	1.35	24.5	1.75	22.5	1.91	20.2	2.13
Developmentally Disabled Residents	0.0	0.5	0.00	0.8	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	32.9	33.9	0.97	31.6	1.04	34.8	0.94	32.9	1.00
General Medical Service Residents	19.0	25.2	0.75	26.1	0.73	23.0	0.82	22.8	0.83
Impaired ADL (Mean)	56.7	49.3	1.15	47.8	1.19	48.4	1.17	49.2	1.15
Psychological Problems	64.6	57.5	1.12	57.6	1.12	59.5	1.09	58.5	1.10
Nursing Care Required (Mean)	7.1	6.9	1.03	7.0	1.02	7.2	0.99	7.4	0.96